

United States District Court
Eastern District of North Carolina
Western Division

Case No. 5:23-CT-3169-BD

(To be filled out by Clerk's Office only)

FILED
JUN 02 2023
PETER A. MOORE, JR., CLERK
US DISTRICT COURT, EDNC
BY ~~RE~~ DEP CLK

Sherrod Lavelle Harris
196640056
(In the space above enter the full name(s) of the plaintiff(s).)

Inmate Number 610670056

(In the space above enter the full name(s) of the plaintiff(s).)

against

Health Services Administration

COMPLAINT

(*Pro Se Prisoner*)

Jury Demand?

Yes
 No

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Section IV. Do not include addresses here.)

NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

I. COMPLAINT

Indicate below the federal legal basis for your claim, if known. This form is designed primarily for pro se prisoners challenging the constitutionality of their conditions of confinement, claims which are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

42 U.S.C. § 1983 (state, county, or municipal defendants)

Action under *Bivens v. Six Unknown Federal Narcotics Agents*, 403 U.S. 388 (1971) (federal defendants)

Action under Federal Tort Claims Act (United States is the proper defendant; must have presented claim in writing to the appropriate Federal agency and received a notice of final denial of the claim pursuant to 28 U.S.C. § 2401(b))

II. PLAINTIFF INFORMATION

Sherrod Lavelle Harris

Name

66667056 10610056

Prisoner ID #

Fci Batner

Place of Detention

Fci 2 Batner PO Box 1500

Institutional Address

Batner

Ac

29804

City

State

Zip Code

III. PRISONER STATUS

Indicate whether you are a prisoner or other confined person as follows:

Pretrial detainee State Federal

Civilly committed detainee

Immigration detainee

Convicted and sentenced state prisoner

Convicted and sentenced federal prisoner

IV. DEFENDANT(S) INFORMATION

Please list the following information for each defendant. If the correct information is not provided, it could result in the delay or prevention of service. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant 1: John Doe
Name
Health Services Administration
Current Job Title
Po Box 1500 Butner FCI
Current Work Address
Butner NC 27509
City State Zip Code

Capacity in which being sued: Individual Official Both

Defendant 2: _____
Name _____

Current Job Title _____

Current Work Address _____

City _____ State _____ Zip Code _____

Capacity in which being sued: Individual Official Both

Defendant(s) Continued

Defendant 3: _____
Name _____

Current Job Title _____

Current Work Address _____

City _____ State _____ Zip Code _____

Capacity in which being sued: Individual Official Both

Defendant 4: _____
Name _____

Current Job Title _____

Current Work Address _____

City _____ State _____ Zip Code _____

Capacity in which being sued: Individual Official Both

V. STATEMENT OF CLAIM

Place(s) of occurrence: manchester and Batnes fc'

Date(s) of occurrence: may 2021 ~ Oct 2021 - Batnes

State which of your federal constitutional or federal statutory rights have been violated:

Eighth Amendment Rights Medical Care.

State here briefly the FACTS that support your case. Describe how each defendant was personally involved in the alleged wrongful actions, state whether you were physically injured as a result of those actions, and if so, state your injury and what medical attention was provided to you.

FACTS:

Estelle v. Gamble, 429 US 97, 103 (1976)

I requested medical assistance multiple times
I requested to speak to doctors or really
anyone that would help me. I was seen
multiple times and no one helped me
I almost died on multiple occasions. please
I also had to be put on a oxygen machine.

Who
did what to
you?

What
happened
to you?

When I got to fci Butner I put in multiple request to see the doctors for my medical needs due to long covid after the fact. Every time I went to see them they would never treat the root of the problems, the lungs and my oxygen.

When did it
happen to
you?

May 26 21 Oct 21

Where did it
happen to
you?

fci Butner N.C.

What was
your
injury?

I was denied treatment which resulted in a lifetime dependence on a Oxygen Machine and tank with a possible end of life trajectory if I contract another virus such as Novel corona virus, I could die as a result and would not be able to breathe correct for the rest of my life as well I cannot work for if I do work I run the risk of hurting myself.

VI. ADMINISTRATIVE PROCEDURES

WARNING: Prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions. 42 U.S.C. § 1997e(a). Your case may be dismissed if you have not exhausted your administrative remedies.

Have you filed a grievance concerning the facts relating to this complaint? Yes No

If no, explain why not:

Is the grievance process completed? Yes No

If no, explain why not:

They Shipped me to manchester fci before I could and I had to Start over, I Went through the process again and they Shipped me back to butner.

VII. RELIEF

State briefly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

we are looking for a preliminary injunction to force fci butner to give me the oxygen tank I need to live. we are looking for compensatory damages in the amount of \$15,500,000 for lost wages since I cannot work anymore as well as hospital bills in the state I'll be living.

VIII. PRISONER'S LITIGATION HISTORY

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in forma pauperis in federal court if that prisoner has "on three or more occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. §1915(g).

Have you brought any other lawsuits in state or federal court while a prisoner?

Yes No

If yes, how many? 1

Number each different lawsuit below and include the following:

- Name of case (including defendants' names), court, and docket number
- Nature of claim made
- How did it end? (For example, if it was dismissed, appealed, or is still pending, explain below.)

Claim no ttf MDP-2023-03179

FCI Manchester

Constitutional claims are not cognizable under the FCA jurisdictional provision

IX. PLAINTIFF'S DECLARATION AND WARNING

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint and provide prison identification number and prison address.

5-13-23

Dated

Sherrod Lavelle Haskins

Plaintiff's Signature

Sherrod Lavelle Haskins

Printed Name

66670-056

Prison Identification #

FCI Medium 2 P.O. 1500
Prison Address

Butner
City

NC
State

27509
Zip Code